



**Granville
Christian Academy**

C O N F I D E N T I A L

Background/Volunteer Application Form

At GCA we believe our volunteers directly impact the spiritual formation of the people they serve and therefore it is critical that we serve with integrity. This information along with a criminal record and identity check will enable us to have a conversation with you to address any character or lifestyle issues that could impact your ability to serve.

Last Name

First Name

Middle Name

Single Separated _____
 Married Divorced Maiden Name _____
 Widowed _____
Spouse’s Name

Date of Birth

Social Security Number

Driver’s License Number

State of Issue

I am requesting to be approved as a GCA Volunteer Yes No
I am requesting to be approved as a Driver Yes No
I acknowledge I must provide **copies** of my driver’s license & insurance cards **if I request to be a driver** Yes No

Primary Phone

Primary Email

Address

Previous Address (If less than seven years at current address.)

Occupation

Work Phone

Student’s Name Attending GCA

Church Affiliation

CPR Trained? Yes No

You may choose to discuss the questions below in confidence with an administrative staff member or Safety & Security Director rather than answering on this form. Answering “Yes” or leaving these questions blank will not automatically disqualify an applicant from serving.

- Yes No Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft or motor vehicle violations)? If yes, please describe offense, state disposition of charge, date disposed, city, county and state in which you were charged with offense.

- Yes No Have you ever been convicted of a sexual offense, offense relating to children, or crime of violence (not covered in question 1 above)? If you have been convicted of such an offense please attach a statement or explanation, including the nature of the offense charged, date, law enforcement agency making the charge, and any other relevant information.

- Yes No Have you ever been reported to a social services agency, law enforcement, child abuse registry, or similar organization, in this state or any other state of the United States, regarding abuse or misconduct involving children? If yes, please explain.

4. Yes Have you ever had a protective order placed against you? If so, please list date of order, duration of order, who order was to protect, and explain circumstances surrounding placement of protective order.
 No

5. Yes Have you had any painful experience (personal abuse in any form), physical disabilities or mental health issues that have better equipped you, or may hinder you from a productive ministry? If yes, please explain.
 No

6. Yes Are there any experiences, marital struggles, addictions (drugs, alcohol, pornography, etc.), character issues (anger, integrity, etc.) or other situations that we need to be aware of as you consider leading others on their spiritual journey? If yes, please explain.
 No

I give my permission to Granville Christian Academy (GCA) to obtain information relating to my criminal record and identity. The criminal history record, as received from reporting agencies, may include arrest and conviction data, plea bargains and deferred adjudications. I understand this information may be used, in part, to determine my eligibility as a volunteer here. The criminal history records check may be repeated at any time. I understand I will have an opportunity to review the criminal history and a procedure is available for clarification if I dispute the records as received.

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) they may have regarding my character and fitness for serving at GCA. In consideration of receipt and evaluation of this application by GCA, I hereby release any individual, church, organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs or family on account of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me on this application.

Should my application be accepted, I agree to be bound by the bylaws and policies of GCA to refrain from unscriptural conduct in the performance of my services on behalf of the school.

I further state that I have carefully read the foregoing release and know the contents thereof, and I sign this release as my own free act. This is a legally binding contract which I have read and understand.

Applicant Signature

Date

I agree to pay the Background Check Fee of \$11.00 Yes No

For individuals willing to pay the \$11.00 fee, one volunteer hour will be credited. Please make checks payable to GCA.

A background check is required every two years.

SHBC uses Verified First Online Volunteer Screening. For more information see www.verifiedfirst.com